P1500009290

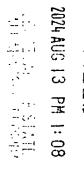
(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

SUBJECT: TROPICAL ROOTER SERVICES, INC Name of Corporation POCUMENTE NUMBER: P15000009290
PAGE 18 PAGE 21 PAGE 20 PAGE 2
DOCUMENT NUMBER: P15000009290
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samit Hernandez-Ramos
Name of Contact Person
TROPICAL ROOTER SERVICES, INC.
Firm/Company
3844 Dale Rd, Apt C
Address
West Palm Beach, FL 33406
City/State and Zip Code
samithernandez@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Samit Hernandez-Ramos 25 - 7042
Name of Contact Person at (561) 255 - 7042 Area Code & Daytime Telephone Num
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section
Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

· · · · · · · · · · · · · · · · · · ·		617.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Florida
		r registered agent, or both, in the State of Florida.
1. The name of	the corporation: TROPICAL ROO	TER SERVICES, INC
	office address: 3844 Dale Rd	
West Palm Beac	<u>'</u>	
3. The mailing a	address (if different): 3844 Dale R	d, Apt C, West Palm Beach FL 33406
4. Date of incorporation/qualification: 01/28/2015		
	I street address of the current regi- tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)
	Haydee Perez	
	854 N. MILITARY TRAIL	
	WEST PALM BEACH, FL 33415	i
6. The name and (if changed):	Samit Hernandez-Ramos 3844 Dale Rd, Apt C P.O. Box NOT acceptable West Palm Beach, FL 33406	
	Samit Hernandez-Ramos	
	3844 Dale Rd, Apt C	
		P.O. Box NOT acceptable
	West Palm Beach, FL 33406	
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered agent,
Such change was authorized by the	as authorized by resolution duly ne board, or the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.
sales.		Samit Hernandez-Ramos
Signatu	re of an officer or director	Printed or typed name and title
I further agree of my duties, an document is bei	the appointment as registered a to comply with the provisions of all I am familiar with and accepting filed merely to reflect a change been notified in writing of this and acceptance.	gent and agree to act in this capacity. all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this ge in the registered office address, I hereby confirm that the change.
		08/06/2024
Sig	nature of Registered Agent	Date
If signing on be	chalf of an entity:	
n/a		_
Т	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *